

P04000123449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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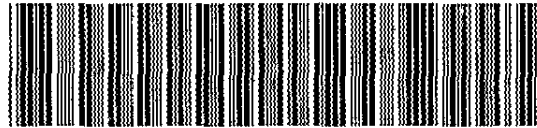
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF TEXAS
COMPTROLLER OF PUBLIC ACCOUNTS

104-31770

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: KRAFT ENTERPRISES INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: STEPHENIE D. KRAFT
Name (Printed or typed)

5114 36TH AVE. DR. W.
Address

BRADENTON, FL. 34209
City, State & Zip

941-704-3843
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

~~KRAFT ENTERPRISES INC.~~ S.D. KRAFT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5114 36TH AVE. DR. W.
BRADENTON, FL. 34209

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW BUSINESS - SALES
& BUSINESS SALES.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

KRAFT, STEPHENIE D.

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

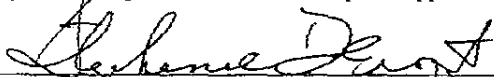
STEPHENIE D. KRAFT
5114 36TH AVE. DR. W.
BRADENTON, FL. 34209

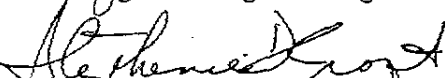
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEPHENIE D. KRAFT
5114 36TH AVE. DR. W.
BRADENTON, FL. 34209

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent


Signature/Incorporator

8/17/04
Date

8/17/04
Date

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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